Brickharon	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery KARE N Oung D. Is delivery address different from item 1? Yes
1. Article Addressed to: Huff a Associates Construction Co., Inc. 1220 Fox Run Pkwy.	If YES, enter oblivery address below:
P.D. Box 2427 Opelika, AL 36803-2427	3. Service Type Discortified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
3:050/741 (Crup + summo 20 Oy)	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7 1 4	2510 0000 3157 6902
	Return Receipt 102595-02-M-1540